

REPORTS INVENTORY

CONTROL NO.

SRB 951 H

PREPARE IN DUPLICATE

1. TITLE OF REPORT (if a fill-in report include Form No.)

951 H LIFE INS AGT NEW DED

2. TYPE
OF
REPORT

STATISTICAL

NARRATIVE

MACHINE-NAME LISTING

3. FUNCTIONAL AREA

☒ PERSONNEL

TRAINING

LOGISTICS

SECURITY

MEDICAL

FINANCE

ADMIN. GENERAL

OTHER (specify)

4. NO. OF COPIES PREPARED

1

5. FREQUENCY (weekly, monthly, quarterly, etc.)

Monthly

6. DISTRIBUTION (No. of components not number of copies)

2

7. FORMAT (memorandum, form, computer print-out, etc)

CP-0

8. ADP PROCESSING

☒ YES

IF YES GIVE ADP PROCESSING NO.

NO

9. DIRECTIVE AUTHORITY REQUIRING REPORT

10. PREPARING COMPONENT (include lowest level contributing information to report)

DIS/OPERATIONS

11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)

12. COST FACTORS

A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED	=	COST PER YEAR
GS063	4.21		.143		.60		12		7.20

B. COSTS OF COMPUTER PRODUCED REPORTS

			.05		12		.60
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TOTAL COSTS PER YEAR

\$ 7.80

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

14. FUTURE GOALS

14a. PROPOSED BY COMPONENT FOR THIS REPORT

☐ RETAIN AS IS☐ OTHER (explain)☐ CHANGE☐ DISCONTINUE

ESTIMATED SAVINGS

MAN-HOURS

DOLLARS

14b. DATE OF INVENTORY

2 NOV 1970

STAT

FORM 142

Classification

(22-26-12)